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CONFIRMATION NO. 3549

<b>SERIAL NUMBER</b> 10/524,857	<b>FILING OR 371(c) DATE</b> 09/21/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> Q86423
<b>APPLICANTS</b> Yoshiki Sakai, Mishima-gun, JAPAN; Nobuo Katsube, Sakai-gun, JAPAN; Akio Nishiura, Mishima-gun, JAPAN; Masanobu Yamamoto, Mishima-gun, JAPAN; Ken-ichi Sugishita, Mishima-gun, JAPAN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP03/10562 08/21/2003				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2002-241271 08/22/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 33
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 23373				
<b>TITLE</b> Agentfor reducing side effects of diclofenac				
<b>FILING FEE RECEIVED</b> 1680	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	